



MISSISSIPPI BOARD OF NURSING
713 Pear Orchard Road, Suite 300
Ridgeland, MS 39157
TELEPHONE: (601) 957-6300

CHANGE OF ADDRESS FORM

Please notify the Board of your address change by completing and submitting the form below to the Board of Nursing, 713 Pear Orchard, Suite 300, Ridgeland, MS 39157. There is no fee to change address.

Please select the appropriate choice and enter Mississippi license or certificate number:

RN License Number:

LPN License Number:

CHT Certification Number:

Name:

First

Middle

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Address:

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City

State

Zip Code

County

Signature _____

Date _____

